Entered - 9-14-00 - sb **CL 00L0564** - GWENDOLYN BURNS

CLAIM OF:

TERRY A. MARTIN

P.O. Box 373108 Decatur, Georgia 30037 01- 2-0505

For vehicular damages alleged to have been sustained as a result of an unraised sewer manhole in the roadway on May 28, 2000 at Peachtree Street, NE & Ralph McGill Boulevard.

BY PUBLIC SAFETY AND LEGAL ADMINISTRATION COMMITTEE:

BE IT RESOLVED by the Council of the City of Atlanta that the action of the Department of Law be approved in authorizing payment to TERRY A. MARTIN the sum of \$697.73 in full settlement and satisfaction of all claims, past, present and future, of every kind and character for vehicular damages alleged to have been sustained as a result of an unraised sewer manhole in the roadway on May 28, 2000 at Peachtree Street, NE & Ralph McGill Boulevard as is more particularly set forth in the within claim; said sum taken from and charged to account 2J01/529017/T31001, Settlement of Suits and Claims, Department of Law.

APPROVED: SUSAN PEASE LANGFORD CITY ATTORNEY

ROSALIND RUBENS NEWELL

DEPUTY CITY ATTORNEY

DEPARTMENT OF LAW - CLAIM INVESTIGATION SUMMARY

Claim No. <u>00L0564</u>	Date:March 17, 2001					
Claimant / Victim TERRY A. MARTIN						
BY: (Atty) (Ins. Co.)						
Address: P.O. Box 373108, Decatur, Georgia 30	0037					
Subrogation: Claim for Property damage \$ 69	97.73 Bodily Injury \$					
Date of Notice: 9/11/00 Me	thod: Written, proper X Improper					
Conforms to Notice: O.C.G.A. §36-33-5 X	Ante Litem (6 Mo.) X					
Date of Occurrence 5/28/00 Pla	ce: Peachtree Street, NE & Ralph McGill Roulevard					
Department PUBLIC WORKS Divis	ion; Sewer Operations					
Employee involved	Disciplinary Action:					
NATURE OF CLAIM: Claimant's vehicle sustained dama	age when she drove over an unraised sewer manhole in the roadway.					
An investigation determined that the City had notice of the	e condition of the manhole but failed to correct it.					
·						
INITIAL CONTRACTOR OF THE PROPERTY OF THE PROP						
INVESTIGATION:						
Control of the state of the sta						
Statements: City employee X Claimant	Others OralX					
Pictures Diagrams Reports: Police	e Dept Report Other X					
Traffic citations issued: City Driver	Claimant Driver					
Citation disposition: City Driver	Claimant Driver					
BACIC OF BECOMMENDATION						
BASIS OF RECOMMENDATION:						
Function: Communicated	38111111					
Function: Governmental	Ministerial X Other Damages reasonable X					
Improper Notice More than Six Months	Other Damages reasonable X					
City not involved Offer reject	ted Compromise settlement					
Repair/replacement by Ins. Co.	Repair/replacement by City Forces Joint Claim Abandoned					
Claimant Negligent City Negligent X	Joint Claim Abandoned					
	-					
	Respectfully submitted,					
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	Kusendolim Dom					
July 10 10 10 10 10 10 10 10 10 10 10 10 10						
	INVESTIGATOR - GWENDOLYN BURNS					
DECOMPLEND ATTON						
RECOMMENDATION:						
	Account charged: 1A012J01_X 2H01					
Claims Manager:	Concur/date					
Committee Action:	Council Action					
FORM 23-61						

COUNCIL OF THE CITY OF ATLANTA

		,			Ru	IRNS
			SEP	1	7,)00	09/13/0
	CIL OF THE CI	ITY OF ATLANTA		RI	E: CLAIM FOR DAMAGES	B
City Ha	11			To	day's Date: 4.0 00	
	ity Avenue, S.W. , Georgia 30335		-00212:03	ROVD		
Dear M	unicipal Clerk:				9-14-00 - SB GWEN BURNS	
		of Atlanta that I have su		in the amount sum of S	lactil 1	property
	e of incident:	5-28-00 (month/day/ year)		_	3. Police called: Yes	No No
4. Loc	ation of incident	(including street address	Dour	stown Per	ach treatalph 1	Mc GII Blue
	ne of your insura	-1-	Herst, te	~~~ ^ .	Policy No. <u>QQ GQ</u>	50322
6. Stat	te what and how	incident occurred:) wis	travelina	down Peac	htree rd
buntun A	ind Mu	1 Car fell	into a	pothole.	The left Sir	6 of my
	as fe	Il in the	hole	. A large	. Pothele or	Man hole
		AND DAMAGES AR CLAIM BEING DEN			HE MAKING OF FALSE CI INAL PROSECUTION!	LAIMS WILL
		er must make the claim of your vehicle (copy of			owing and attach two (2) estimat	es of repair and
•		tonda Guin	94	750 PQ	Terry N.IV	laction
100	ur vernere	(Make)	(Year)	(Tag Number)	(Driver's Name)	
City	y vehicle: <u>/</u> /	U/A	N/A	Z	(Department/Bureau) Some 434 G7 Cell # 970	
		(Make)	(City Driver's	s Name)	(Department/Bureau)	-244-1247
9 Wit	mess. PCI	(Name)	(Address)	pulldercrest rol	(Telephone Number)	-617-1500
		ent of this claim in n n admission of liability o	o way waives		nity of the City of Atlanta,	as granted by
11. Thi	is claim should b	e mailed immediately	to the address s	hown above.		
ĮН	EREBY SWEAR	OR AFFIRM THAT T	HE ABOVE	Jam	A. Marin	
D.17	TON A TION IC	TRUE WID CORREC		•	(Drint Claimant's Mama)	

(Print Claimant's Name)

P.D. Boy 273107

(Address)

(City, State and Zip Code)

170-144-19013 44-34-63 (Work Number) (Home Number)

9/219-5221

01-/2 -0505